FEC FORM 2 STATEMENT OF CANDIDACY

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FEC FORM 2 (REV. 02/2009)

<u> </u>					12 DEC IN	PM 1. 10
1. (a) Name of Candidate (in full) Elizabeth Warren						
(b) Address (number and street) 24 Linnaean Street	☐ Check if a	ddress change	t	2. Candidate's FE S2MA00170	C Identification No	mber
(c) City, State, and ZIP Code				3. Is This	New	Amended
Cambridge	7	MA 021		Statement /	(N) OR	X (A)
Party Affiliation DEMOCRATIC PARTY	5. Office Sought Senate		6. State & Dis	trict of Candidate 00		
D	ESIGNATION OF	PRINCIPAL	CAMPAIG	N COMMITTEE		
7. I hereby designate the following na	imed political committee	as my Principal	Campaign Com		18 election	1(5).
NOTE: This designation should be	filed with the appropriate	office listed in	the instructions.		,	
(a) Name of Committee (in full) Elizabeth for MA, Ir	IC.			• • • • • • • • • • • • • • • • • • • •		
(b) Address (number and street) P.O. Box 290568			,			, , , , , , , , , , , , , , , , , , , ,
(c) City, State, and ZIP Code						·
Boston			MA	02129		
I hereby authorize the following naticandidacy. NOTE: This designation about the				nmillee, to receive a	nd expend funds o	n behalf of my
NOTE: This designation should be	filed with the principal ca	mpaign commit	lee.			
(a) Name of Committee (in full)						
Massachusetts Fut	ure Funa					
(b) Address (number and street) 124 Washington Street	- A 1 ₁₁₋₁	-,		······································	<u>_</u>	
Suite 101						
(c) City, State, and ZIP Code						
Foxborough			MA	02035		
I certify that I have exa	mined this Statement ar	nd to the best of	my knowledge a	nd belief it is true, co	nrect and complete	 9.
Signature of Candidate	· · ·	-		Date II/2	8/12	
NOTE: Submission of false, erroneous	, or incomplete information	on may subject	lhe person signin	g this Statement to p	penalties of 2 U.S.C	C. §437g.

FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)		Page 2 /
	N OF OTHER AUTHORIZED COMMITTEES ncluding Joint Fundraising Representatives)	[ADDITIONAL]
I hereby authorize the following named committee, which is candidacy.	s NOT my principal campaign committee, to receive and expend funds	on behalf of my
NOTE:This designation should be filed with the p	principal campaign committee.	
(a) Name of Committee (in full)		
Cantwell-Warrren 2012		
(b) Address (number and street) 3518 Fremont Avenue North Suite 545		,
(c) City, State and ZIP Code		
Seattle	WA 98103	
	N OF OTHER AUTHORIZED COMMITTEES Including Joint Fundraising Representatives)	[ADDITIONAL]
I hereby authorize the following named committee, which is candidacy.	s NOT my principal campaign committee, to receive and expend funds	on behalf of my
NOTE:This designation should be filed with the p	orincipal campaign committee.	
(a) Name of Committee (in full)		<u></u>
Massachusetts Senate 2012		
(b) Address (number and street) 120 Maryland Avenue, NE		
(c) City, State and ZIP Code		
Washington	DC 20002	
	OF OTHER AUTHORIZED COMMITTEES Including Joint Fundraising Representatives)	[ADDITIONAL]
I hereby authorize the following named committee, which is candidacy.	s NOT my principal campaigл committee, to receive and expend funds o	on behalf of my
NOTE:This designation should be filed with the p	rincipal campaign committee.	
(a) Name of Committee (in full)		
Women on the Road to the Se	enate 12 and Counting - Boston	
(b) Address (number and street) 120 Maryland Avenue, NE		
(c) City, State and ZIP Code		
(-),		

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FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003) 3 / 3 Page [ADDITIONAL] **DESIGNATION OF OTHER AUTHORIZED COMMITTEES** (Including Joint Fundraising Representatives) I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) Progressive Victory 2012 (b) Address (number and street) PO Box 583144 (c) City, State and ZIP Code Minneapolis MN 55458 [ADDITIONAL] **DESIGNATION OF OTHER AUTHORIZED COMMITTEES** (Including Joint Fundraising Representatives) I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) (b) Address (number and street) (c) City, State and ZIP Code [ADDITIONAL] **DESIGNATION OF OTHER AUTHORIZED COMMITTEES** (Including Joint Fundraising Representatives) I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) (b) Address (number and street) (c) City, State and ZIP Code



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12/03/2012

(2012 (**0536/6**)

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DANA K. MCCALLUM SUPERINTENDENT

HART SENATE OFFICE BUILDING SUITE 232 WASHINGTON, DC 20510-7116 PHONE: (202) 224-0322

United States Senate

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